How to Obtain a Birth Certificate

A certified copy or transcript may be issued only to:

- 1. A person with a New York State Court Order.
- 2. The person named on the birth certificate, if 18 years of age or older.
- 3. The parents of the person named on the birth certificate.
- 4. Lawful representative of the person named or the parents of the person named on the birth certificate.

<u>In-Person Request</u>- The request may be accepted from a qualified applicant if the following conditions are satisfied:

- 1. The applicant completes and signs the application form DOH-296A.
- 2. The applicant provides acceptable identification.
- 3. The applicant is eligible to receive a copy.
- 4. \$10.00 cash or money order for each request.

Acceptable Identification

- 1. State issued drivers or non-drivers license.
- 2. Military ID card.
- 3. Passport.
- 4. Police report documenting the applicant's name, address and theft or loss of positive ID.
- 5. Two current utility bills issued immediately preceding the application and, showing the requestor's name and address.
 - **In the event that the applicant's last name on the identification differs from the information on the certificate, a copy of the applicant's birth certificate, marriage certificate, and legal name change paperwork must accompany.
 - ** If the applicant has a notarized authorization to obtain the record on behalf of an eligible individual, the original notarized statement and ID from the eligible individual must accompany the request.

<u>Mail Request</u>- a request from a qualified applicant may be accepted in writing on a signed application DOH-296A or by letter under the following conditions:

- 1. The applicant provides the name, date of birth, place of birth, father's first and last names and mother's first and maiden names of the person named on the birth certificate: AND
- 2. The applicant provides his/her current name and address along with their relationship to the person named on the birth certificate: AND
- 3. The request must be signed by the applicant.
- 4. A copy of an acceptable for of I.D.
- 5. \$10.00 money order for each request.

Fee: \$10.00 per certified copy requested. Payment may be made in cash (do not send cash in the mail) or money order made payable to "Town of Islip".



Address of Applicant

Street _____

City

Application to Local Registrar for Copy of Birth Record

| REGINA V. DUFFY, TOWN CLERK & REGISTRAR | | | for Copy of Birth Record | | | |
|---|----------------------------|-------------------------------|---|--------|----------------------------------|--|
| CERTIFICATE INFORMATION | | | | | | |
| First Middle Last Name | | Date of Birth | | | | |
| Hospital (If not hospital, Place of Birth | (Village, T | Village, Town or City) County | | | | |
| First Middle Last | | | First | Middle | Last | |
| Father | | Maiden Na of Mother | Maiden Name of Mother | | | |
| Number or Copies Requested Enter Birth No. If Known | | | Enter Local Registration No. if Known | | | |
| Purpose for Which | Passport | | Working Papers | | Welfare Assistance | |
| Record is Requested (Check One) | Social Security-Retirement | | School Entrance | | Veterans Benefits | |
| | Social Security-SSI | | Driver's License | | Court Proceeding | |
| | Retirement | | Marriage License | | Entrance into | |
| Employment | | | | | Armed Forces | |
| | Other (Specify) | | | | | |
| | | | | | | |
| APPLICANT INFORMATION | | | | | | |
| Name | | | rney, give name to person whose | | ationship of your s required. | |
| First Middle | Last | (name | of client) | | (relationship) | |
| What is your relationship to person whose record is required? | | | FOR REGISTRAR'S USE ONLY | | | |
| Self Parent | Other (specify) | (Pł | (Photocopy ID and attach to application form) | | | |
| | | TYPE C | OF ID | | | |
| Telephone No. () | ne No. () | | Driver's License | | | |
| Social Security No | | | State | No | | |
| Signature of Applicant | Date | | Other ID, sp | ecify | | |
| | MM DD YY | | Oct. (10, 3p | | | |

Zip

State